pplication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

69853259

CLAIMS AS FILED - PART I							SMALL ENTITY				OTHER THAN	
			(Column 1) (		(Colur	Column 2)		TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS 20						RA	ΓE	FEE	] [	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		· Ø		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		Ø		X4	)=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT						+13	5=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOT	AL		OR	TOTAL	210	
CLAIMS AS AMENDED - PART II										•	OTHER	
(Column 1) (Column 2) (Column 3)							SMA	ALL I	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA <sup>-</sup>	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CLASS	=	X4	)=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		+13	5=		OR	+270=	
								OTAL		OR	TOTAL ADDIT. FEE	·
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT.	rtE	<u> </u>	1	AUUII. FEE	
		(Column 1) CLAIMS	THE STATE OF		HEST	(Column 3)			ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RA <sup>*</sup>	ΓΕ	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4	)=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<b>5</b> _		1	+270=	
							+13	5= DTAL		OR	+270= TOTAL	
0							ADDIT.			OR	ADDIT. FEE	
>		(Column 1)			mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RA*	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X40	)=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<del>                                   </del>			1		
	IS Alban and the state of		ha ambaria art	ima a	a 40" in act	umn 2	+13			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	imper Previously Pa nber Previously Pa	aid For" (Total o	r Independ	dent) is the	highest numbe	r found in t	he ap	propriate bo	x in co	lumn 1.	